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To: Hospices

HSPCE 21

From: Judy Fryback, Director  
Bureau of Quality Assurance

**Effective Date: February 1, 1997**

<b>Wisconsin Administrative Code HSS 131 - Bereavement Service Plan of Care Review Guideline</b>
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Wisconsin Administrative Code, HSS 131.43(3)(d), requires that a hospice provide bereavement services to families of hospice patients. These services must be: 1) available for one year following the patient's death, and 2) compatible with the direction of the hospice core team. Although a bereavement plan is initiated after the death of a patient, **prior to** the patient's death the hospice **must** assess any grief/loss issues or needs of the patient and family through an integrated plan of care.

Section HSS 131.42(4)(a), Wisconsin Administrative Code, requires that the integrated plan of care must be reviewed and updated by the hospice core team **at least every two weeks** after the initiation of services, at more frequent intervals (if specified in the plan), and as frequently as necessary in response to a significant change in condition. A strict interpretation of this code means that, once the bereavement plan of care is initiated, the hospice core team must review the plan at least every two weeks **for one year following a patient's death**.

The Bureau of Quality Assurance will interpret the **frequency** of reviews for bereavement plans of care as specified in HSS 131.42(4)(a), Wisconsin Administrative Code, as follows:

Effective February 1, 1997, the intent of HSS 131.42(4)(a) is met **if** a hospice meets the requirements outlined in this guideline. The hospice core team will be required to review the bereavement plan of care at least every two weeks (or more frequently, based on identified family needs) **for a minimum of two months following a patient's death**. As part of the two-month review, the hospice core team will reassess the family/caregiver's needs and update the bereavement plan for the remaining 10-month period. The plan for the remaining 10-month period **must** identify: 1) the family/caregiver's specific needs or concerns; 2) intervention strategies to meet the identified needs; 3) employees responsible for delivering the care; 4) established timeframes for evaluating the interventions; and 5) the effect of the intervention in meeting established goals. The 10-month plan does not, however, have to be reviewed every two weeks by the core team. Instead, the frequency of the reviews should be based upon identified family needs.

The Bureau of Quality Assurance has provided guidance to the Wisconsin Hospice Organization in the development of a document for hospices to use when providing bereavement services. This document outlines the section HSS 131.43(3)(d), Wisconsin Administrative Code requirements for bereavement services, interpretive guidelines, survey procedures and rationale. The document will be distributed by the Wisconsin Hospice Organization.

Questions regarding this guideline may be directed to either Richard Cooperrider, Supervisor, Community-Based Providers, at (608) 267-7389 or Barbara Woodford, Nursing Consultant, at (608) 264-9896.